PIO/58/06 (08:03)

S. Palent and Traderoark Officer U.S. DEPARTMENT OF CONNERCO

ORDER PROBLEMON S	CESSOCIEST: MCI OF 1893.	NO PERSONS IN CASE	Printed to Lesson	d ro 9 conscoou s	a ergounitación Co	MESS & COL	INTER BYAND COME	COURCE WASH	
Under the Paperson Reductor Apr of 1993, no parsons an required to response to a coastook of information under PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Petro PTO-875							109913428		
CLAIMS AS FILED - PART (Column 2) SMALL ENTITY						эq	OTHER THAN		
FOR NUMBER FILED		70 197,044	er extra	RATE	FEE	7	RATE	FEE	
BASIC FEE' (37 CFR 1.16(a))					-			1	
TOTAL CLANS (3) CFR 1.16(cf)	PRETIN	20		X		7 oa			
INDEPENDENT CLAMS	90/40	3.		1		1 08		 	
MATIPLE DEPENDENT	1		OR.		 				
* If the Afference in color	TOTAL	+	<u>ـ</u> ۲	TOTAL					
"If the difference in column 1 is less than sero, enter 'V' in column 2. CLAIMS AS AMENDED - PART II						_ ~	ion		
CLA	ms as amende	D - PART R							
	(Column 1)		(Column 2)	. SMAL	LENTITY	OR		THAN ENTITY	
± 1	CLAMS LEMAINING AFTER MENOMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADGI- TIONAL FEE	
DI CAN LIBEO	14	7 70		x s ·		OR.	×		
Til Dr.Cee i cterb	H Moss	1-3	• /	X 5		oa	1. 82100	04.00	
FERE? PRESENTATIO	45 -		OR.						
.)				701AL ACOL FEE		OR.	TOTAL ADD'L FEE		
1 64 5 (Cocons 1) (Column 2) (Column 3)						,	ADD C PEE		
œ R	CLAIMS EMAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOL- TIONAL FEE		RATE	ADD: TONAL FEE	
Total Care Care Care Care Care Care Care Care	3 Minus	70	٠.	X 1 .	1 1.	oa l			
Managerian '	3 Mance	"3	-	× 5		06	* *		
AMST PRESENTATION OF MULTIPLE DEPENDENT CLASS (27 CFR 1.1967)						OR	••		
				TOTAL ADDL FEE		on '	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)						, •.			
	MAINING	HIGHEST	PRESENT	RATE		-1			
	AFTER ENDMENT	PRÉVIOUSLY PAID FOR	EXTRA	MAIL	ADDI- TIONAL		RATE	ADD: TIONAL FEE	
CIT CITY CANCEL	Maca	-		x 2111 at	TI I	. GR	×	- T-E-	
Z Total AM	Menus	m ;.;	• ;	×	111 16	OA	x 4 1 4		
PREST PRESENTATION OF MAXIMAE DEPENDENT CLAME (3) OFR 1.46(6)					111.112	08	-, I I		
				TOTAL ADD'L FEE	115	OR L	ADOL FEE		
"If the entity in column 1 is less than the entry in column 2, write "0" in column 3. If the "highest Number Presonably Paid For" in "145 SPACE is less than 20, enter "20". If the "highest Number Presonably Paid For" AI ThiS SPACE is less than 3, enter "1". The "highest clearable Presonably Paid For" (AI ThiS SPACE is less than 3, enter "1". The "highest clearable Presonably Paid For" (AI ThiS SPACE is less than 3, enter "1".									

This collection of information is required by 37 CFR. 1.6. The Information is required to ration or ration is benefit by the public works in 50 list past by it. USFTO to proceed you controllation. Confidence(style generated by 33 U.S.C. 122 and 27 CFR. 1.1.6. This collection is estimated to be 1.3 Thermises to complete the process of the collection of estimation of the collection is estimated to the collection in the collection is the collection in the collection in the collection is the collection in the collection is the collection in the collection in the collection is the collection in the collection is the collection in the collection in the collection is the collection in the collection i

If you need assistance in completing the form, and 1-800-PTO-9199 and select option